

Boys
 Girls

CIF SOUTHERN SECTION CHAMPIONSHIPS

DIVING VERIFICATON CARD



Div I
 Div II
 Div III
 Div IV

PLEASE PRINT

SPRING BOARD DIVING Grade Level _____ Date _____

Last Name: _____ First Name: _____

School: _____ League: _____

Coach's Home Phone: (____) _____ Email: _____

COMPETITION VERIFICATION

6 / 11 Dive Event: (Check one) Auto Qualifying Points Consideration Points

Location: _____ Date _____ Total Points _____

Meet Director's Signature Diving Referee's Signature Coach's Signature

6 / 11 Dive Event: (Check one) Auto Qualifying Points Consideration Points

Location: _____ Date _____ Total Points _____

Meet Director's Signature Diving Referee's Signature Coach's Signature

(This card must be accompanied by the Official Diving Form or Official Back-up Sheet signed by the Table Secretary and the Meet Director or Diving Referee.)

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